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2131

RANKUM		Application No.	09/898,849		
TRANSMITTAL FORM		Filing Date	July 3, 2001		
(to be used for all correspondence after initial filing)		First Named Inventor	Todd A. Anderson		
		Art Unit	2131		
		Examiner Name	Gail O. Hayes		
Total Number of Pages in This	Submission 7	Attorney Docket Number	42390P11768		
		t all that and the			
	ENCLOSURES (chec	ck all that apply)			
Fee Transmittal Form	Drawing(s)	)	After Allowance Communication to Group		
Fee Attached	Licensing-r	elated Papers	Appeal Communication to Board of Appeals and Interferences		
Amendment / Response	Petition		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final Affidavits/declaration(s	Petition to C	Convert a Application	Proprietary Information		
Extension of Time Request	·	ttorney, Revocation Correspondence Address	Status Letter		
Express Abandonment Request  Terminal D		Disclaimer	Other Enclosure(s) (please identify below):		
Information Disclosure Statement		Refund	Return Receipt Postcard		
PTO/SB/08		er of CD(s)			
Certified Copy of Priority Document(s)					
Response to Missing Parts/ Incomplete Application					
Basic Filing Fee	Remarks				
Declaration/POA	IDS cited re	eferences: 1 US Pate	ent and 1 Other Art		
Response to Missing Parts under 37 CFR 1.52 or 1.53					
SIG	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm Joseph	Joseph Lutz, Reg. 110. 45,705				
$egin{array}{c c} \textit{or} & & & & \\ \textit{Individual name} & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & \\ & & & \\ & \\ & & \\ & & \\ & & \\ & & \\ & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\$	ELY, SOKOLOFF,	TAYLOR & ZAFN	MAN LLP		
Signature					
Date Multiplust 35, 2004					
	CERTIFICATE OF MAIL	ING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
Typed or printed name Man	rilyn Bass		1		
Signature	YUUUUUNOP	$\chi(\lambda)$	Date 18,26,04		

Based on PTO/SB/21 (04-04) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 06/04/2004. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22B13-1450



(\$)

Effective 01/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

Based on PTO/SB/17 (10-03) as modified by Blakely, Selokoff, Taylor & Zafman (w/r) 02/16/2004 SEND TO: Commissioner for Patents, P.O. Byx 1450, Alexandria, VA 22313-1450

Complete if Known			
Application Number	09/898,849		
Filing Date	July 3, 2001		
First Named Inventor	Todd A. Anderson		
Examiner Name	Gail O. Hayes		
Art Unit	2131		
Attorney Docket No.	42390P11768		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
☐ Check ☐ Credit card ☐ Money ☐ Other ☒ None 3. ADDITIONAL FEES						
Deposit Account	Large	Entity	Sma	dl Entity	у	
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	 FeeDescription	FeePaid
Account Number 02-2666	1061	130	2051	65	Surcharge - late filing fee or oath	
Deposit	1062	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	2052	130	2052	130	Non-English specification	l
The Commissioner is authorized to: ( check all that apply)	2053 1812	2,520	2053 1812	2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920 *	1804	920	Requesting publication of SIR prior to Examiner action	
Charge any additional fee(s) or underpayment of fees as required under 37 CFR	1805	1,840 *	1805	1,840		
Charge fee(s) indicated below, except for the filing fee	1000	,,,,,,,	1	.,0 .0	Examiner action	
to the above-identified deposit account	1251	110	2251	55	Extension for reply within first month	
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply within third month	
Large Entity Small Entity  Fee Fee Fee Fee Description FeePaid	1254	1,480	2254	740	Extension for reply within fourth month  Extension for reply within fifth month	
Code (\$) Code (\$)	1255 1404	2,010 330	2255	1,005 165	Notice of Appeal	
1001 770 2001 385 Utility filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1002 340 2002 170 Design filing fee	1403	290	2403	145	Request for oral hearing	
1003 530 2003 265 Plant filing fee 1004 770 2004 386 Reissue filing fee	1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filing fee	1452	110	2452	56	Petition to revive - unavoidable	
SUBTOTAL (1) (\$)		1,330	2453	665	Petition to revive - unintentional	
	1501	1,330	2501	665	Utility issue fee (or reissue)	
2. EXTRA CLAIM FEES Extra Fee from Claims below FeePaid	1502	480	2502	240	Design issue fee	
Total Claims	1503 1460	640 130	2503 2460	320 130	Plant issue fee  Petitions to the Commissioner	
Independent 20 = X X = = XX X X X X X X X X X X X X X	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	<u> </u>
Multiple Dependent =	1806	180	1806	180	Submission of Information Disclosure Stmt	
Large Entity   Small Entity	8021	40	8021	40	Recording each patent assignment per	
Fee Fee Fee Fee Description Code (\$) Code (\$)					property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invention to be	
1203 290 2203 145 Multiple Dependent claim, if not paid	4004	770		205	examined (37 CFR § 1.129(b))  Request for Continued Examination (RCE)	
1204 86 2204 43 **Reissue independent claims over original patent	1801 1802	770 900	2801 1802	385 900	Request for expedited examination	
1205 18 2205 9 **Reissue claims in excess of 20 and over		e (specify)	1002	300	of a design application	
original patent		- (,				
SUBTOTAL (2) (\$)	* Reducer	d by Basic F	ilina Fee	Paid	SUBTOTAL (3) (\$)	
**or number previously paid, if greater, For Reissues, see below	,			(0)		
SUBMITTED BY			- 4/-		Complete (if applical	ole)
Name (Print/Type) Joseph Lutz	Re	egistratio torney/Age	nt)	4	43,765 Telephone (310) 207	7-3800
Signature Signature	$\overline{}$				Date りょうう	.04

Docket No.: 42390P11768

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

TODD A. ANDERSON, ET AL.

Application No.: 09/898,849

Filed: July 3, 2001

For: AN APPARATUS AND METHOD FOR

SECURE, AUTOMATED RESPONSE TO DISTRIBUTED DENIAL OF SERVICE

**ATTACKS** 

Art Group: 2131

Examiner: Gail O. Hayes

### INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed for applications filed after June 30, 2003). This IDS and IDS Citation Form are being submitted before the mailing of a first Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

It is hereby stated that no item of information contained in the Information Disclosure Statement was cited in a patent office in a counterpart application, and, to the knowledge of the undersigned, after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to any individual associated with the filing or prosecution of the subject application more than three months prior to the filing of the Information Disclosure Statement.

The references were cited in a communication in a counterpart PCT application on August 12, 2004, in a counterpart PCT application.

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: [111]. 25, 200

12400 Wilshire Boulevard, 7th Floor Los Angeles, CA 90025

Telephone: (310) 207-3800

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Marilyn Bass

Date

OIPE

AUG 3 U 2004

Substitute for form 1449A/PTO

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet 1 of 2

Complete if Known				
Application Number	09/898,849	_		
Filing Date	July 3, 2001			
First Named Inventor	Todd A. Anderson			
Art Unit	2131			
Examiner Name	Gail O. Hayes			
Attorney Docket Number	42390P11768			

	U.S. PATENT DOCUMENTS						
		Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where		
Examiner Initials*	Cite No.1	Number - Kind Code <sup>2</sup> (if known)	or Iceus Date	Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
<u> </u>		US-6,141,778	10-31-2000	Kane et al.			
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	FOREIGN PATENT DOCUMENTS						
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Initials*	No.1	Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	L	
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Examiner	Date
Signature	Considered

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

<sup>&</sup>lt;sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.



Substitute for form 1449A/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

**Sheet** 2 **of** 2

Complete if Known				
Application Number	09/898,849			
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Art Unit	2131			
Examiner Name	Gail O. Hayes			
Attorney Docket Number	42390P11768			

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cite No.¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		Copy of Notification of Trans. of IPER mailed 08/12/04 in co-pending PCT Application No. PCT/US02/20759	
	·		

Examiner	Date
Signature	Considered

Based on PTO/SB/08B (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wtr) 08/11/2003. Send To: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

<sup>&</sup>lt;sup>1</sup>Applicant's unique citation designation number. <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.